



Patent Application  
Atty. Ref.: 11696.0059

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of

Applicant: Martin Philip Usher

Group Art Unit: 2617

Serial No.: 09/833,593

Examiner: Brandon J. Miller

Filed: April 13, 2001

Confirmation No. 1690

For: CELLULAR RADIO SYSTEM

**NOTICE OF APPEAL**

Commissioner of Patents  
Customer Window  
Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision of the Examiner dated August 30, 2006.

The Commissioner is hereby authorized to charge the requisite appeal fee and any other charges or credits to Deposit Account 19-4293 (Case No. 11696.0059).

Respectfully submitted,

Scott Watkins  
Reg. No. 36,175

Date: November 20, 2006

Steptoe & Johnson LLP  
1330 Connecticut Ave., N.W.  
Washington, DC 20036  
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Effective 12/08/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/833,593
		Filing Date	April 13, 2001
		First Named Inventor	Martin Philip Usher
		Art Unit	2617
		Examiner Name	Brandon J. Miller
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket Number	11696.0059	
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>\$500.00</b>		

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <b>19-4293</b>
	Deposit Account Name: <b>Step toe &amp; Johnson LLP</b>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments	<input checked="" type="checkbox"/> Credit any overpayments
of fee(s) under 37 CFR 1.16 and 1.17	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	<u>Fees Paid (\$)</u>
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<u>Fee Description</u>						<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
0	-20 or HP+	0	x 50 = \$00.00	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			180.00	
0	-3 or HP+	0	x 200 = \$00.00				
HP = highest number of independent claims paid for, if greater than 3							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
- 100 =	0	0		\$250	\$0		
(round up to a whole number)							
<b>4. OTHER FEE(S) Notice of Appeal</b>							
						<u>Fees Paid (\$)</u>	
						<b>\$500.00</b>	

<b>SUBMITTED BY</b>					
Signature			Registration No.	36,175	Telephone (202) 429-3000
Name (Print/Type)	Scott D. Watkins		Date	11/11/06	